

**2005
HSRS MENTAL HEALTH
MODULE DESKCARD**

MODULE TYPE 9

CLIENT CHARACTERISTICS (Field 7)

- 19 Developmental disability - brain trauma
- 23 Developmental disability - cerebral palsy
- 25 Developmental disability - autism
- 26 Developmental disability - mental retardation
- 27 Developmental disability - epilepsy
- 28 Developmental disability - other or unknown
- 29 Family member of developmental disability client
- 86 Severe emotional disturbance - child / adolescent
- 02 Mental illness (excluding SPMI)
- 03 Serious and persistent mental illness (SPMI)
- 14 Family member of mental health client
- 04 Alcohol client
- 05 Drug client
- 10 Chronic alcoholic
- 12 Alcohol and other drug client
- 16 Family member of alcohol and other drug client
- 17 Intoxicated driver
- 39 Gambling client
- 07 Blind / visually impaired
- 08 Hard of hearing
- 32 Blind / deaf
- 79 Deaf
- 09 Physical disability / mobility impaired
- 36 Other handicap
- 59 Unmarried parent
- 71 Victim of domestic abuse
- 50 Regular caregiver of dependent person
- 55 Frail elderly
- 57 Abused / neglected elder
- 18 Alzheimer's disease / related dementia
- 43 Migrant
- 44 Refugee
- 45 Cuban / Haitian entrant
- 33 Corrections / criminal justice system client (adult only)
- 84 Repeated school truancy
- 37 Frail medical condition
- 38 Criminal justice system involvement (alleged or adjudicated)
- 72 Victim of abuse or neglect (alleged or adjudicated)
- 80 Homeless
- 90 Special study code (to be defined as need arises)
- 99 None of the above

SPECIAL CHILDREN'S SERVICES CATEGORIES

- 61 CHIPS - abuse and neglect
- 62 CHIPS - abuse
- 63 CHIPS - neglect
- 64 Family member of abused / neglected child
- 69 JIPS - status offender
- 70 Family member of status offender
- 68 CHIPS - other
- 74 Family member of CHIPS - other
- 66 Delinquent
- 73 Family member of delinquent

LEGAL/COMMITMENT STATUS (Field 9a)

- 1 Voluntary
- 2 Voluntary with settlement agreement
- 3 Involuntary civil - Chapter 51
- 4 Involuntary civil - Chapter 55
- 5 Involuntary criminal
- 6 Guardianship only

BRC TARGET POPULATION (Field 10)

Persons in need of:

- H Ongoing, high intensity, comprehensive services
- L Ongoing, low intensity services
- S Short-term situational services

PRESENTING PROBLEM (Field 11)

- 01 Marital / family problem
- 02 Social / interpersonal (other than family problem)
- 03 Problems coping with daily roles and activities (including job, school, housework, daily grooming, financial management, etc.)
- 04 Medical / somatic
- 05 Depressed mood and / or anxious
- 06 Attempt, threat, or danger of suicide
- 07 Alcohol
- 08 Drugs
- 09 Involvement with criminal justice system
- 10 Eating disorder
- 11 Disturbed thoughts
- 12 Abuse / assault / rape victim
- 13 Runaway behavior
- 14 Emergency detention

COUNTY OF RESIDENCE (Field 13)

- | | | |
|----------------|--------------|-----------------|
| 01 Adams | 25 Iowa | 49 Portage |
| 02 Ashland | 26 Iron | 50 Price |
| 03 Barron | 27 Jackson | 51 Racine |
| 04 Bayfield | 28 Jefferson | 52 Richland |
| 05 Brown | 29 Juneau | 53 Rock |
| 06 Buffalo | 30 Kenosha | 54 Rusk |
| 07 Burnett | 31 Kewaunee | 55 St. Croix |
| 08 Calumet | 32 La Crosse | 56 Sauk |
| 09 Chippewa | 33 Lafayette | 57 Sawyer |
| 10 Clark | 34 Langlade | 58 Shawano |
| 11 Columbia | 35 Lincoln | 59 Sheboygan |
| 12 Crawford | 36 Manitowoc | 60 Taylor |
| 13 Dane | 37 Marathon | 61 Trempealeau |
| 14 Dodge | 38 Marinette | 62 Vernon |
| 15 Door | 39 Marquette | 63 Vilas |
| 16 Douglas | 40 Milwaukee | 64 Walworth |
| 17 Dunn | 41 Monroe | 65 Washburn |
| 18 Eau Claire | 42 Oconto | 66 Washington |
| 19 Florence | 43 Oneida | 67 Waukesha |
| 20 Fond du Lac | 44 Outagamie | 68 Waupaca |
| 21 Forest | 45 Ozaukee | 69 Waushara |
| 22 Grant | 46 Pepin | 70 Winnebago |
| 23 Green | 47 Pierce | 71 Wood |
| 24 Green Lake | 48 Polk | 72 Menominee |
| | | 73 Out of state |

SOCIAL SUPPORT (Field 15)

(Optional)

Family / Marital / Interpersonal Relationships

- 01 Very frequent contact, positive contact
- 02 Frequent or more often, usually positive contact
- 03 Occasional or more often, sometimes positive, sometimes negative
- 04 Contact is usually negative
- 05 Little or no social support

REFERRAL SOURCE (Field 18)

(Optional)

- 01 Self
- 02 Family or friend
- 03 Law enforcement (except court or correction agency)
- 04 Court or correction agency
- 05 School system or education agency
- 06 Social service agency
- 07 Inpatient or residential
- 08 Physician / health care provider
- 99 Other

STANDARD PROGRAM

CATEGORY / SUBPROGRAM (Field 22)

SPC/SUB CODE	STANDARD PROGRAM CATEGORY NAME	UNITS TO BE REPORTED
Inpatient		
503	Inpatient	Days
503 10	Emergency detention	Days
505	DD center / nursing home	Days
925	Institution for mental disease	Days
Residential		
202	Adult family home	Days
203	Foster home	Days
204	Group home	Days
205	Shelter care	Days
504	Residential care center	Days
506	CBRF	Days
Partial Day		
108	Work related services	Hours
615	Supported employment	Hours
706	Day center services - nonmedical	Hours
Outpatient		
303	Juvenile probation and supervision	Hours
507	Counseling / therapeutic resources	Hours
507 10	Medication management	Hours
507 20	Individual	Hours
507 30	Group	Hours
507 40	Family (or couple)	Hours
507 50	Intensive in-home	Hours
507 60	Family support	Hours
704	Day treatment - medical	Hours
Emergency		
501	Crisis intervention	Hours
503 20	Emergency room - hospital setting	Hours
Other		
509	Community support	Hours
604	Case management	Hours

Note: Any other appropriate SPCs associated with mental health services should be reported even though not listed here. The SPCs listed above are those that require units of service reporting.

SPC CLOSING REASON (Field 28)

- 01 Completed service - major improvement
- 02 Completed service - moderate improvement
- 03 Completed service - no change
- 04 Transferred to another community based resource
- 05 Administratively discontinued service (i.e., no contact with agency for 90 days or noncompliance)
- 06 Referred
- 07 Withdrew against staff advice or services not wanted
- 08 Funding / authorization expired
- 09 Incarcerated (local jail or prison)
- 10 Entered nursing home or institutional care (IMD, RCC, etc.)
- 11 No probable cause
- 99 Death

CONSUMER STATUS INFORMATION

Required when BRC Target Population in Field 10 is coded H or L.

BRC TARGET POPULATION UPDATE (Field 31)

Persons in need of:

- H Ongoing, high intensity, comprehensive services
- L Ongoing, low intensity services
- S Short-term situational services

PSYCHOSOCIAL AND ENVIRONMENTAL STRESSORS (DSM IV, Axis IV) (Field 32)

- 1 None
- 2 Mild
- 3 Moderate
- 4 Severe
- 5 Extreme
- 6 Catastrophic
- 0 Inadequate information

GLOBAL ASSESSMENT OF FUNCTIONING (DSM IV, Axis V) (Field 33)

Enter a specific 2 digit code.

- 91+ Superior functioning in a wide range of activities
- 81-90 Minimal symptoms, good functioning in all areas
- 71-80 Symptoms are transient and expectable reactions
- 61-70 Some mild symptoms
- 51-60 Moderate symptoms
- 41-50 Serious symptoms
- 31-40 Some impairment in reality testing and communication
- 21-30 Behavior is considerably influenced by delusions or hallucinations
- 11-20 Some danger of hurting self or others
- 1-10 Persistent danger of severely hurting self or others
- 00 Inadequate information

HEALTH STATUS (Field 34)

- 1 No health condition
- 2 Stable / capable
- 3 Stable / incapable
- 4 Unstable / capable
- 5 Unstable / incapable
- 6 New symptoms / capable
- 7 New symptoms / incapable
- 9 Unknown

HEALTH CARE APPOINTMENT (Field 35)

- Health, Vision, Dental
- 1 Kept appointment or no appointment needed
- 2 Unable to access needed services
- 3 Did not keep or refused appointment
- 9 Unknown

SUICIDE RISK (Field 36)

- 1 No risk factors
- 2 Presence of risk factors
- 3 High potential for suicide
- 9 Unknown

RESIDENTIAL ARRANGEMENT (Field 37)

- 1 Street or shelter
- 2 Private residence or household
- 3 Supported or semi-supervised residence
- 4 Specialized facility - on-site supervision
- 5 Other institution
- 6 Jail or correctional facility

DAILY ACTIVITY (Field 38)

- 1 No educational, social or planned activity
- 2 Part-time educational activity
- 3 Full-time educational activity
- 4 Meaningful social activity
- 5 Volunteer or planned formal activities
- 6 Other activities
- 9 Unknown

EMPLOYMENT (Field 39)

- 1 Competitive
- 2 Temporary
- 3 Supported
- 4 Sheltered
- 5 Prevocational activity - job training, transitional, vocational rehabilitation
- 6 Not working - seeking employment
- 7 Unemployed / retired - uninterested in working
- 8 Other status - homemaker, student, caregiver, SSI disabled
- 9 Not in the labor force
- 99 Unknown

EMPLOYMENT LEVEL (Field 40)

- 1 Full time - 35+ hours per week
- 2 Part-time - 20-34 hours per week
- 3 Other - less than 20 hours per week

LEGAL/COMMITMENT STATUS UPDATE (Field 41)

- 1 Voluntary (no commitment status)
- 2 Voluntary with settlement agreement
- 3 Involuntary civil - Chapter 51
- 4 Involuntary civil - Chapter 55
- 5 Involuntary criminal
- 6 Guardianship only

INCARCERATION / INVOLVEMENT WITH CRIMINAL JUSTICE SYSTEM (Field 42)

- 1 None
- 2 On probation
- 3 Arrest(s)
- 4 Jailed / imprisoned (includes Huber)
- 5 On parole
- 6 Juvenile justice system contact
- 9 Unknown

FINANCIAL SUPPORTS (Field 43)

- 1 Paid employment
- 2 Social Security retirement benefits / pension
- 4 Disability payments
- 5 Worker's compensation
- 6 Food stamps
- 7 Temporary assistance to needy families (TANF)
- 8 Trust fund / savings income
- 9 Alimony / maintenance, child support
- 10 Unemployment compensation
- 11 Relatives and / or spouse
- 12 Rent supplements
- 13 County cash assistance
- 14 None
- 15 Other
- 16 Supplemental Security Income (SSI)
- 17 Social Security Disability Income (SSDI)
- 99 Unknown

SOS DESK (608) 266-9198

9:00 - 11:30 A.M. and 12:30 - 2:30 P.M.

Or leave voice mail message.

E-mail Address: soshelp@dhfs.state.wi.us

FAX: (608) 267-2437

HSRS Handbook and Terminal Operator's Guide:
<http://www.dhfs.wisconsin.gov/HSRS/index.htm>

WI Department of Health and Family Services
 Division of Disability and Elder Services
 DDE-855 I (Rev. 1/2005)